Key Facts and Actions

- COVID-19 cases in country increased by 34% since the last report with geographic spread from two to five provinces.
- Government of Mozambique now requires mandatory use of masks in public places and transport and suspended all international flights until 31 May, except for humanitarian missions.
- UNICEF supported the training of 126 community health workers on COVID-19 response and integrated community case management.
- Finalization and pre-test of an interactive voice response (IVR) phone survey on COVID-19 in partnership with World Bank.
- WASH IPC Infrastructure support ongoing to nine isolation treatment centers.

Situation Overview

Cases of COVID-19 in Mozambique continue increasing, with 115 cases being diagnosed, distributed in four provinces. It is important to note that 77% of the cases to date are asymptomatic. Approximately 82% of the cases are male and 67% are nationals. There was an increase of 34% of confirmed cases since the last report (30 April) and the country has two additional provinces with cases, Inhambane and Sofala. Most of the cases are concentrated in Cabo Delgado province (69%) followed by Maputo city with 19%. Of the new cases, four are children bringing the total to five pediatric cases in the country.

Furthermore, South Africa, the country with the most reported cases in Africa, repatriated suddenly approximately 800 Mozambicans as result of a worker’s strike in migrant transit center due to lack of PPEs. This represents an additional risk for the country as there are confirmed cases of COVID-19 within this group.

The cases detected in Sofala province, Beira city and Dondo district are raising concerns of the health authorities given that the cases do not have history of travel out of the country and have had no confirmed contact with known infected individuals.
According to the Minister of Health, the new cases detected are a result of active surveillance ongoing in health facilities. The additional cases indicate the existence of new transmission chains in new locations. In order to reinforce the capacity of provincial teams, the Ministry of Health deployed senior staff to the affected provinces.

With the extension of the state of emergency until 31 May, the Government of Mozambique defined additional preventive measures including the mandatory use of masks in public spaces and in public transport as well as suspending all international flights to Mozambique until 31 May, with exception for humanitarian missions and supplies duly authorized. The government continues to close border posts, put in place surveillance measures at borders that remain open, closed schools and universities and placed limits on size of public gatherings. The school closures have impacted 8.5 million students at all levels with 14,667 pre-primary, primary and secondary schools currently closed.

The Ministry of Health has also established treatment and isolation centers and Rapid Response Teams in all provinces. The Ministry of Health has developed a Preparedness and Response Plan with actions in the following areas: coordination, disease surveillance and point of entry, laboratory, case management, supplies and logistic, human resources, infection prevention and control (IPC) and communication and social mobilization. Other Ministries had also developed sectoral plans to respond to the secondary impacts of the pandemic.

**Coordination**

The Ministry of Health (MoH) has established an Emergency Commission within the ministry to ensure effective coordination of COVID-19 prevention and response through the efforts of nine Technical Working Groups co-led by staff of the MoH and development partners. Internally, the Commission meets daily, and twice weekly in a broader group with the participation of key departments of the ministry, line ministries and development partners.

There are also ongoing coordination efforts targeted at mitigating the secondary impacts that may emerge as a result of the outbreak. To this end, the government disaster agency (INGC) and the Ministry of Economy and Finance (MEF) are currently working with line ministries to identify the needs and priority measures to be taken. Aligned with this, the Humanitarian Country Team (HCT), led by the Resident Coordinator and composed of UN agencies, NGOs, Red Cross, and donor representatives, is developing a Response Plan to COVID-19, focusing on sector specific impacts of COVID-19.

**UNICEF Response (during reporting period)**

**Health**

- Supported MoH to develop the strategy for community-based response to COVID-19 and the continuation of services at community level.
- Conducted assessment of COVID-19 treatment center in Pemba.
- Trained of 126 community health workers in Sofala on COVID-19 response and continuity of integrated community case management (iCCM) for child illness.

**Nutrition**

- Nutrition Response plan to COVID-19 defined, pending final validation from ministry.
- Dissemination of key nutrition messages related to COVID-19 has started.
- Community health workers strategy on delivering essential nutrition services at community level defined.

**WASH**

- Signed one partnership agreement and developing three additional partnerships for infrastructure support to nine isolation treatment centers, provide outreach messaging on hygiene and COVID, and for communal handwashing facilities management. In addition, finalizing direct contracts for infrastructure repairs and works in three isolation treatment centers.
- WASH Cluster response plan finalized with Cluster partners. Currently developing technical notes with the MOH WASH sub-group for guidance to partners.
- Ongoing international procurement for HTH for disinfection of health facilities, local procurement for IPC in health facility supplies, emergency handwashing stations, and industrial washing machines for isolation wards.
Communication for Development (C4D), Community Engagement & Accountability

- Ongoing design of remote learning training materials for community workers on CE during COVID-19.
- Ongoing production of TV and radio spots on physical distancing.
- Finalization and pre-test of integrated voice response (IVR) phone survey on COVID-19 KAP in partnership with World Bank.
- Nine social media contents focused on ensuring continuity of demand of immunization, positive practices related to nutrition and health-seeking behaviors against TB shared through social media platforms.

Education

- Initial discussion on the preparation of a distance learning module on psycho-social support in collaboration.
- Supported Government partners in the development of the Global Program for Education (GPE) accelerated funding for Covid-19 ($15m) grant. Submitted and recommended for funding by the World Bank.

Child Protection

- Follow-up meetings were held with Ministry of Health, FDC, Ministry of Gender, Children and Social Action, AASMO and REPSSI to strengthen social work force capacity, including on psycho-social support and mental health interventions. A draft strategic note was developed.
- Reviewed Radio Mozambique (RM) proposal for messaging on good parenting and psychosocial support for young children and adolescents to ensure that priorities and envisioned processes are well capture before starting production of radio programs.
- More than 1,000 children living in care institutions were reintegrated with their families. Efforts are being made to link the families to social protection program benefits to which they are entitled.
- Prepared concept note and initiated development of curriculum to train Gender, School Health and Emergency Focal Points of the education sector to provide PSS first aid and identify and refer cases of violence to the appropriate authorities for follow-up.
- Supported organizations for people with disability to articulate COVID-19 oriented programs for which UNICEF will mobilize resources.

Social Protection and Cash-Based Assistance

- Fundraising efforts with new donors in progress to address financial gap between current Social Protection Response Plan and available resources.
- Technical and political discussions with Ministry of Gender, Children and Social Action (MGCAS) and National Institute for Social Action (INAS) ongoing on social protection plan. Selection of prioritized districts/neighbourhoods advancing, with priority to Cabo Delgado.
- Design of a communication component, with a focus on COVID-19, PSEA and female empowerment, to complement cash transfers underway.

Supply and logistics

- A new Supply strategy has been developed, on behalf of the Health Procurement Technical Working Group (HPTWG), to support the implementation of the MoH Supply plan.
- Working with Supply Division to organize the first shipment of PPEs to Mozambique by air during the coming days.
- A local tender expression of interest has been launched to pre-qualify suppliers of PPE in the country, to develop a supplier database.
- Ongoing discussions with WHO and WFP to roll-out the new global UN Supply Chain platform.
Human Interest Stories and External Media

Traditional Media
- Mozambique Television (TVM) evening Talk Show “Primeira Pagina” on the topic of online safety for children, domestic violence and exploitation of children during Covid19, promoting IoGT and SMSbiz programme, with Dep Rep ai, Edina Kozam and Comms Specialist, Francelino Murela, 28th April 20
  https://wetransfer.com/downloads/b69bc0db823c0707028010d7cda3b7e420200429061659/03950f4e625ee2bb66f23b3bfac3ed8520200429061732/e92a40
- Op-ed Noticias: Continuity in Education during Covid19, 27 April 20
- Pata-Pata PR translated and shared with national media
  https://www.unicef.org/mozambique/comunicados-de-imprensa/m%C3%BAsica-mais-desafiadora-e-alegre-do-mundo-relan%C3%A7ada-pelo-unicef - picked up by the main national media;
- Op-ed Noticias, also published on UNICEF Moz website: On GBV during Covid19

Digital Media
Links to new videos with UNICEF health specialist answering questions from social media
- https://www.youtube.com/watch?v=EQX8AN8SO-M (healthy nutrition during COVID-19 - reach on Facebook is 57 thousand)
- https://www.youtube.com/watch?v=IATRXHfJg64 (breastfeeding during COVID-19)

Link to videos with Youth Advocates on how they are coping at home, home schooling, helping in house chores
- https://www.youtube.com/watch?v=cu491NG-AAQ (Hiris Jamal, 17 years – reach on Facebook is 204 thousand)
- https://www.youtube.com/watch?v=vh2NMLQ_JU8 (Ragia Amade, 19 years - reach on Facebook is 14 thousand)

Support to Ministry of Health COVID-19 social media campaign
- https://www.facebook.com/unicef.mozambique/posts/2927940133957570/ (home made masks - reach on Facebook is 177 thousand)
- https://www.facebook.com/unicef.mozambique/photos/a.120138581404420/2918022468282670/ (physical distance, what is and why is needed - reach on Facebook is 694 thousand)
- https://www.facebook.com/unicef.mozambique/photos/a.120138581404420/2915826588502258/ (True/False on vaccination - reach on Facebook is 310 thousand)
- https://www.facebook.com/unicef.mozambique/photos/a.120138581404420/2913372005414383/ (True/False on weather - reach on Facebook is 16 thousand)
- https://www.facebook.com/unicef.mozambique/posts/2904311929653724/ (HIV and COVID19 - reach on Facebook is 13 thousand)

Video supporting Pata Pata campaign
- https://www.facebook.com/unicef.mozambique/videos/253862302419754/ (reach on Facebook is 61.5 thousand)
Funding Overview and Partnerships

In support of the country efforts to prevent and contain the COVID-19 as well as address its impact, UNICEF has developed a 9-month preparedness and response plan with preliminary funding requirements of $11.3 million USD. As of mid-May, the office has received ~US$ 820,000 for COVID-19 response thanks to the generous contributions from USAID, Education Cannot Wait and Global Partnership for Education.

Challenges

- Delays in receiving clearance to import supplies for the response.
- Global crisis affecting other countries at greater scale, which make difficult for supplies or funding to see Mozambique as a priority.
- High demand globally for key supplies limit the ability of the authorities and partners to act timely – long lead time for arrival of ordered supplies in country.
- Continued civil unrest and displacement in north of country.

UNICEF Mozambique: http://www.unicef.org.mz/
UNICEF Mozambique: http://www.facebook.com/unicef.mozambique
UNICEF Mozambique: http://www.youtube.com/UnicefMozambique

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Annex A: Summary of Programme Results

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target to 31 Dec 2020</th>
<th>Results as of 14 May 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RCCE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people reached on COVID-19 through messaging on prevention and access to services</td>
<td>15,000,000</td>
<td>12,000,000</td>
</tr>
<tr>
<td># of people engaged on COVID-19 through RCCE actions</td>
<td>2,500</td>
<td>0</td>
</tr>
<tr>
<td># of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms</td>
<td>13,500</td>
<td>240&lt;sup&gt;i&lt;/sup&gt;</td>
</tr>
<tr>
<td><strong>IPC</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people reached with critical WASH supplies (including hygiene items) and services.</td>
<td>112,000</td>
<td>0</td>
</tr>
<tr>
<td># of healthcare facility staff and community health workers trained in Infection Prevention and Control (IPC)</td>
<td>2,500</td>
<td>126</td>
</tr>
<tr>
<td><strong>CONTINUITY OF HEALTH CARE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases among children, pregnant and breastfeeding women.</td>
<td>2,500</td>
<td>295</td>
</tr>
<tr>
<td>Number of caregivers of children (0-23 months) reached with messages on breastfeeding in the context of COVID-19</td>
<td>100,000</td>
<td>0</td>
</tr>
<tr>
<td>Number of children 6-59 months admitted for treatment of severe acute malnutrition (SAM)</td>
<td>19,000</td>
<td>2,105</td>
</tr>
<tr>
<td><strong>ACCESS TO CONTINUOUS EDUCATION, CHILD PROTECTION AND GBV SERVICES INDICATOR</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children supported with distance/home-based learning.</td>
<td>1,112,137</td>
<td>261,100</td>
</tr>
<tr>
<td># of children without parental or family care provided with appropriate alternative care arrangements</td>
<td>400</td>
<td>0</td>
</tr>
<tr>
<td># of children, parents and primary caregivers provided with community based mental health and psychosocial support</td>
<td>10,000</td>
<td>0</td>
</tr>
<tr>
<td># of UNICEF personnel &amp; partners that have completed training on GBV risk mitigation &amp; referrals for survivors, including for PSEA</td>
<td>326</td>
<td>149</td>
</tr>
<tr>
<td><strong>SOCIAL PROTECTION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of households (economically affected by COVID-19) in urban and peri-urban areas receiving cash transfers for basic needs</td>
<td>200,000</td>
<td>0</td>
</tr>
</tbody>
</table>

<sup>i</sup> Target revised to 15,000,000
<sup>ii</sup> In the last report there was an error in this result, it was reported 2,000 instead of 200.